

| POSITION                  | INITIALS   | ID NO.     | DATE     |
|---------------------------|------------|------------|----------|
| FEE DETERMINATION         | <i>1/1</i> | <i>1/1</i> | 11-27    |
| O.I.P.E. CLASSIFIER       | <i>1/1</i> | <i>1/1</i> |          |
| FORMALITY REVIEW          | <i>1/1</i> | 720        | 12-25-01 |
| RESPONSE FORMALITY REVIEW |            |            |          |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
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*2-8/6*  
*1/1/01*